

APR 13 2006

---

## FAX TRANSMITTAL COVER SHEET

---

**CONLEY ROSE, P.C.  
5700 Granite Parkway, Suite 330  
Plano, Texas 75024-6616  
Telephone Number: (972) 731-2288  
Fax Number: (972) 731-2289**

---

**PLEASE DELIVER THE FOLLOWING PAGES IMMEDIATELY TO:**

**NAME:** Mail Stop: Amendment; Group Art Unit 1712  
Examiner Charles R. Richard  
United States Patent and Trademark Office

**FAX:** (571) 273-8300

**FROM:** Rodney B. Carroll

**DATE:** April 13, 2006

**RE:** U.S. Patent Application Serial No. 10/764,667  
Filing Date: January 26, 2004  
Atty Docket: 210589US (4081-05300)  
Amendments and Response to Office Action dated January 13, 2006 (16 pages)  
Fee Transmittal (1 page)

---

Total Number of Pages (Including Cover Page): 18

---

**IF YOU DO NOT RECEIVE ALL THE PAGES,  
PLEASE CALL IMMEDIATELY**

*This facsimile and the information it contains is intended to be a confidential communication only to the person or entity to whom it is addressed. If you have received this facsimile in error, please notify us by telephone at the above telephone number and return the original to this office by mail.*

---

**RECEIVED  
CENTRAL FAX CENTER**

APR-13-2006 09:11

CUNLEY & ROSE PC

9727312289 P.18

**APR 13 2006**

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# **FEE TRANSMITTAL For FY 2006**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$)** **200.00**

### **Complete if Known**

Application Number	10/764,667
Filing Date	January 26, 2004
First Named Inventor	Olusegun M. Falana
Examiner Name	Charles R. Richard
Art Unit	1712
Attorney Docket No.	210589US00 (4081-05300)

### **METHOD OF PAYMENT (check all that apply)**

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 50-1515 Deposit Account Name: Conley Rose, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### **FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

#### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### **2. EXCESS CLAIM FEES**

##### Fee Description

Each claim over 20 (including Reissues)

##### Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims HP=42 Extra Claims Fee (\$) Fee Paid (\$)

Multiple Dependent Claims

40 - 20 or HP = 0 x 50.00 =

Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

0 0

Indep. Claims HP=3 Extra Claims Fee (\$) Fee Paid (\$)

4 - 3 or HP = 1 x 200.00 = 200.00

HP = highest number of independent claims paid for, if greater than 3.

#### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

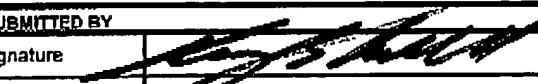
100 - 100 = 0 / 50 = 0 (round up to a whole number) x 0 = 0

Fee Paid (\$)

#### **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

<b>SUBMITTED BY</b>		<b>Registration No.</b> 39,624 (Attorney/Agent)	<b>Telephone</b> (972) 731-2288
<b>Signature</b>			
<b>Name (Print/Type)</b>	Rodney B. Carroll		
	<b>Date</b> 4-13-06		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

APR-13-2006 09:07

CONLEY & ROSE PC

RECEIVED  
CENTRAL FAX CENTER

9727312289

P.02

Atty Docket: 210589US (4081-05300)

APR 13 2006

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Olusegun M. Falana, et al.

§

Group Art Unit: 1712

Serial No.: 10/764,667

§

Examiner: Charles R. Richard

Filed: January 26, 2004

§

Confirmation No. 8797

For: METHODS OF REDUCING SAG IN NON-AQUEOUS FLUIDS

§

Mail Stop: Amendment  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Pursuant to 37 C.F.R. §1.8, I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office to Facsimile No. (571) 273-8300 on 4/13/2006

Edith Shek  
Edith S. Shek

CERTIFICATE OF TRANSMISSION

Sir,

AMENDMENTS AND RESPONSE TO  
OFFICE ACTION DATED JANUARY 13, 2006

In response to the Office Action dated January 13, 2006, Applicants respectfully request the following amendments to the above-identified application as follows. The changes made are shown by underlining the added text and striking through the deleted text in bold.

**Amendment to the Specification** is on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 11 of this paper.

10764667

04/14/2006 RFEKA011 00000028 501515 200.00 DA

01 FC:1201

34280.01/4081.05300

1